



CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450 Alexandria, Virginia 22313-1450 on December 15, 2003.

By: Edward C. Meagher Date: December 15, 2003.

PATENT
1078-5CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: TERRIS ET AL.

Patent Appln. No.: 10/661,120

Filed: September 12, 2003

For: **GOLF GLOVE AND METHOD OF FORMING SAME**

PARENT

Examiner: GARY L. WELCH

PRELIMINARY AMENDMENT

Mail Stop: Non-fee amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Preliminary to examination of the above-identified application, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

The Listing of the claims begins on page 4 of this paper.

Amendments to the drawings begin on page 7 and include proposed drawing corrections and attached replacement sheets.

Remarks begin on page 8 of this paper.



PATENT

Atty. Docket No.1078-5CON:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Terris et al.

Examiner: Gary L. Welch

Serial No.: 10/661,120

Group: Art Unit

Filed: September 12, 2003

Dated: December 15, 2003

For: GOLF GLOVE AND METHOD OF FORMING SAME

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Mail Stop Non-Fee Amendment

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- [X] No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. RATE FEE	ADDIT. RATE FEE
TOTAL	11* MINUS	20**	=	X 9 \$	X 18 \$ 0
INDEP.	2* MINUS	3**	=	X 43 \$	X 86 \$ 0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				X 140 \$	X 280 \$ 0
				TOTAL	OR TOTAL \$ 0
				ADDIT. FEE	\$ -0-

* If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

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The Highest No. Previously Paid For (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

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Dated: December 15, 2003

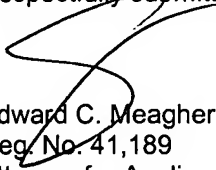
Edward C. Meagher

☐ Please charge Deposit Account No. 50-2140 in the amount of \$____. Two (2) copies of this sheet are enclosed.

☐ A check in the amount of \$_____ is enclosed.

☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-2140. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-2140 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



Edward C. Meagher
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ECM/gm